

Only property owners, licensed contractors or agents with written authorization may obtain permits.

| CALLE | .) 1 . 1 . | , , | J | | , , | Permit <u>#</u> | |
|---|--|---|---------------------|--|-----------------------------------|--|--------------------|
| | |] RESIDENTIAL | COMMERCI | AL |] AGRICULTURAL | | (Office Use Only) |
| (Please mark all the New Structure Fire Repair Garage/Storage Window change | nat apply) Second Residence Demolition Tenant Improvement Reroof | ☐ Mobile Home ☐ Termite Repair ☐ Plumbing ☐ Solar | ☐ Ag Bu ☐ Electr | | Addition Swimming Pool Mechanical | Remodel Deck/Patio Cover Winery/Wine Tasting | |
| Project Address: | | | | | | APN: | |
| Nearest Cross Street or Intersection: | | | | Total Contract Price; | | | |
| Complete scope of | of work: | | | | | | |
| | | | | | | | |
| □ Residential □ Living Area | Existingsf | emodel | <u>uild</u> | Grading Electrical | <u>:</u> | ion removal | (Sq ft) |
| □Garage/Storag □Deck □Porch □Carport □Remodel □Other Explain | eesf sf sf sf sf sf | sf sf sf sf sf | | Outlets of Solar (ro | oof) | (ground) | |
| □Commercial □Office | ☐Tenant Improved Existing sf | ment □Addition Proposed sf | | Plumbing □Water H □Repairs □Gas line | leater DWV | line | |
| ☐Medical ☐Retail ☐Restaurant ☐Warehouse ☐Other | sf sf sf sf sf sf | sf sf sf sf sf | | Miscelland □Reroof □Demolit □Other (e | eous: Reside ion Winde xplain) | e ow Changeout | |
| Applicant Information: | Please check the appropriate bo | ox for the primary contact | □AGENT | □PROPERTY O | WNER CONTRACTOR | ARCHITECT/DESIGNER | JENGINEER |
| Agent Name: | | | Telephone: | | | Email: | |
| Address: | | | City/State/ | Zip: | | | |
| Property Owner Name: | | | Telephone: | | | Email: | |
| Address: | | | City/State/ | Zip: | | | |
| □OWNER/BUILDER? * <i>Pro</i> | of of Ownership may be req | uired | | | | | |
| Contractor Name: | | | Telephone: | | | Email <u>:</u> | |
| Address: | | | City/State/ | Zip: | | License # and Class | |
| Architect/Designer Nan | ne: | | Telephone: | | | Email: | |
| Address: | | | City/State/ | Zip: | | | |
| Engineer Name: | | | Telephone: | | | Email: | |
| Address: | | | | | | License/Registration # | |

Contractor to complete yellow highlighted section

Owner/Builder to complete blue highlighted section

| LICENSED CONTRACTOR DECLARATION: I of the Business and Professions Code, and my | hereby affirm under penalty of perjury that license is in full force and effect. | l am licensed under the provisions of Chapter 9 (commer | ncing with Section 7000) of Division 3 |
|--|--|--|---|
| DATE: | CONTRACTOR SIGNATURE: | | |
| checkmark(s) I have placed next to the applical demolish, or repair any structure, prior to its is Contractors' State License Law (Chapter 9 (com | ole item(s) (Section 7031.5, Business and Prosumes and Prosuance, also requires the applicant for the promencing with Section 7000) of Division 3 of the | empt from the Contractors' State License Law for the rearofessions Code: Any city or county that requires a permotermit to file a signed statement that he or she is license the Business and Professions Code) or that he or she is expicts the applicant to a civil penalty of not more than fiv | it to construct, alter, improve, ed pursuant to the provisions of the exempt from licensure and the basis |
| all of OR portions of the wor License Law does not apply to an owner o | f property who, through employees' or perso the building or improvement is sold within o | e compensation, will do ed for sale (Section 7044, Business and Professions Code onal effort, builds or improves the property, provided th ne year of completion, the Owner-Builder will have the b | at the improvements are not |
| | ot apply to an owner of property who builds | Contractors to construct the project (Section 7044, or improves thereon, and who contracts for the projects | |
| ■ I am exempt from licensure und | er the Contractors' State License Law | for the following reason: | |
| covered by this permit, I cannot legally se | ell a structure that I have built as an owner-b | I must have resided for at least one year prior to compluilder if it has not been constructed in its entirety by lices available upon request when this application is submit | ensed contractors. I understand |
| DATE: | OWNER SIGNATURE: | | |
| I hereby affirm under penalty of perjury of I have and will maintain a certific provided for by Section 3700 of the Labor Policy No. I have and will maintain worker permit is issued. My workers' compensati | erest, and attorney's fees. one of the following declarations: ficate of consent to self-insure for wor Code, for the performance of the work for w rs' compensation insurance, as required on insurance carrier and policy number are: | by Section 3700 of the Labor Code, for the performance | ndustrial Relations as |
| Carrier | • | | |
| Name of Agent I certify that, in the performanc become subject to the workers' com Section 3700 of the Labor Code, I shall f | pensation laws of California , and agree | Tel No issued, I shall not employ any person in anym e that, if I should become subject to the workers' comper | nanner so as to nsation provisions of |
| Lender's Name | | he performance of the work for which this permit is issu | |
| Lender's Address | | | |
| I have read this construction permit applic | ctor or () the property owner* or () cation and the information I have provided is | authorized to act on the property owner's behals correct. I agree to comply with all applicable city and county to enter the above-identified property for inspec | ounty ordinances and |
| | | sed work shall be deemed to have been abandon or 180 days after application expiration date. | ned 1 year after the date of |
| Date: | SIGNATURE OF APPLICANT: | | |
| * Requires Separate Owner Verification F | | rate Contractor Authorization Form | |

T://Special/Counter Services/Front Counter Documents/Permit Application-May11,2015